## **TITLE V INSPECTION PERMIT**

Application fee: \$100.00 Make check payable to: **Town of Pembroke** 

## The Commonwealth of Massachusetts Town of Pembroke

## **APPLICATION FOR PERMIT**

Do not write in this space.				
Permit No.:	Applicatio	Application Date:		
Date Permit Issued:				
To the Licensing Authorities:				
In accordance with the provisions of the a Permit is hereby made by ( <i>please p</i>		thereto, appli	cation for	
Name:(Full name Title 5 inspector) Contact email address:				
Company:				
Address:(# Street)	(City)	(State)	(Zip)	
Telephone: ()				
to conduct Title V inspections in the	Town of Pembroke	<b>.</b>		
(Signature of applicant)	<u> </u>			
(Address)				
(Telephone)	<u> </u>			

Per the unanimous vote of the Pembroke Board of Health at the August 6, 2012 meeting, all Title 5 inspections reports MUST include the following photos:

- 1. Before T-5 begins prior to digging.
- 2. Septic tank with measuring stick in place in the tank showing the fluid levels.
- 3. Zabel filter.
- 4. Inlet T.
- 5. D-box in place -- level and sound.
- 6. T-5 after completion with everything closed.

Photos may be on paper or snap shots. Please notate address and date of each photo. No exceptions.

If you are unable to print out the photos, you may email them to:

Icullity@townofpembrokemass.org

and cc to:

cmirotta@townofpembrokemass.org

Include the address and the date of the photos.